FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

P97000103664 **DOCUMENT #**

1. Corporation Name

May 17, 1999 8:00 am Secretary of State

05-17-1999 90086 033 ***150.00

G'AJ WEB ENTERPRISES, INC					* 5 556416 - 90086 - 33		
Principal Plac	e of Business Maili	ng Address			·		_
10672	2 LAGO WELLEDY DRIVE	10672 LAG	go Wellek	by DRIVE			
SUNRISE, FL 33351 SUNRISE, FL 3335				ر اگرخ ج	DO NOT WRITE IN THIS SPACE		
				13-2	3. Date Incorporated or Qualifed		
ı					12 09 97 4. FEI Number		
2. Principal Place of Business 2a. Mailing Address						Ap	plied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State 28 Zip Country Zip Zi					65-0800121	Not Applicable	
					5. Certifcate of Status Desired		3.75 Additional Fee Required
				6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees			
					8. This corporation owes the current year Intangible Personal Property Tax. Yes		
24	9. Name and Address of Current Registe		30		10. Name and Address of New Registere		<u></u>
	5. Haine and Address of Current Register	eu Agent	81	Name	IV. Haine and Address of New Registere	a Agent	
Filings, INC							
				82 Street Address (P.O. Box Number is Not Acceptable)			
3732 N.W. 1645troot FT. LAUDORDAIE, FL 33311-4132				83			
				City	F	85 Zip C	ode
SIGNATURE	m familiar with, and accept the obligations of, S Signature, typed or printed name of registered agent and title if ar OFFICERS AND DIRECT	pplicable (NOTE:	Registered Agent s	ignature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE	D OFFICERS AND DIRECT	DELETE	1.1 TITLE	· I	ABBITIONS/CITANGES TO OFFICERS	Change	Addition
NAME	. —		1.2 NAME			onlange	
STREET ADDRESS	DEARTH THE NOWE		1.3 STREET A	DDDECC			
CITY-ST-ZIP			1.4 CITY-ST-Z	!			
TITLE	SUNRISE, FL 33351	☐ DELETE	2.1 TITLE	ur		Change	Addition
NAME	•		2.2 NAME			_ ,	
STREET ADDRESS	JONATHAN MCKINNON 10672 LAGO Welleby DRI SUNRISE FL 33351	VÉ	2.3 STREET A	DDRESS			
CITY-ST-ZIP	Supplies El 33361		2. 4 CITY-ST-				
TITLE	342618 (- 2 3 3 3 1	☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			- 3-2 NAME		·	 -	
STREET ADDRESS			3.3 STREET AL	DDRESS			
CITY-ST-ZIP			3.4. CITY- ST-				
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET AL	ODRESS			
CITY-ST-ZIP			4.4 CITY-ST-Z	ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET AL	DDRESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

748-3925

☐ Change

Addition

CR2E034 (11/98)